



UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF WEST VIRGINIA

Timothy S. Jackson 3556689

(Enter above the full name of the plaintiff  
or plaintiffs in this action).

(Inmate Reg. # of each Plaintiff)

**VERSUS**

**CIVIL ACTION NO.** 3:20-cv-00864

(Number to be assigned by Court)

Scott Eplin (District Manager)  
Mark Elswick (Supervisor)

(Enter above the full name of the defendant  
or defendants in this action)

**COMPLAINT**

**I. Previous Lawsuits**

- A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment?

Yes \_\_\_\_\_

No ✓

B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).

1. Parties to this previous lawsuit:

Plaintiffs:

---

---

---

Defendants:

---

---

---

2. Court (if federal court, name the district; if state court, name the county);

---

---

3. Docket Number:

---

4. Name of judge to whom case was assigned:

---

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)

---

6. Approximate date of filing lawsuit:

---

7. Approximate date of disposition:

---

II. Place of Present Confinement: Western Regional Jail

A. Is there a prisoner grievance procedure in this institution?

Yes \_\_\_\_\_ No /

B. Did you present the facts relating to your complaint in the state prisoner grievance procedure?

Yes \_\_\_\_\_ No /

C. If your answer is YES:

1. What steps did you take? \_\_\_\_\_

\_\_\_\_\_

2. What was the result? \_\_\_\_\_

\_\_\_\_\_

D. If your answer is NO, explain why not: \_\_\_\_\_

\_\_\_\_\_

### III. Parties

(In item A below, place your name and inmate registration number in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of Plaintiff: Timothy S. Jackson #3556689

Address: 1 O'Hanion Place, Barboursville WV 25504

B. Additional Plaintiff(s) and Address(es): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item D for the names, positions, and places of employment of any additional defendants.)

C. Defendant: Scott Eplin (District Manager) Mark Elswick (Supervisor)  
is employed as: \_\_\_\_\_

at Huntington DOH 801 Madison Ave. Huntington WV, 25902

D. Additional defendants: Jeffrey Stenent, Warden  
Kathy Smith, Job Coordinator and Brian Greenwood  
Dante Clark Jennifer Henderson DOE  
Charleston Work Release 1305 <sup>4901</sup> Mansford Street  
Charleston 25301

#### IV. Statement of Claim

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

I was working through Charleston Work Release for  
Huntington DOH. I was told that I had to  
work on a Hill-side by the bridge going from West  
Virginia to Ohio. I told Mark Elswick that  
I wasn't able to do that kind of work  
because I had pins in both of my ankles and  
feet. He made me do it anyway and I fell  
and broke one of the pins on June 18, 2019

**IV. Statement of Claim (continued):**

On June 23, 2019, Mark Elswick fired me from the DCH after I was injured on the job. Because of that I was wrote up by Kathy Smith for refusing to work and was sent to a maximum security facility and was put in the hole for sixty days. After showing Ms. Smith my paper work from the ER that I had a pin broke in my foot. When the write up got to hearing Officer Brian Greenwood

**V. Relief**

State briefly exactly what you want the court to do for you. Make no legal arguments.  
Cite no cases or statutes.

\$200,000 for emotional distress from being in the hole for sixty days because I was illegally fired. An additional \$200,000 for pain and suffering and emotional distress from Charleston Correctional Center and Work-Release. for denying me medical treatment after I've had an injury and proper paper-work to be seen by a specialist, and punitive damages.



## Statement of Claim (Continued)

I also showed him my paperwork from the ER and he tossed my papers to the side and still founded me guilty and sent me from work release to the hole in a maximum security facility for sixty-days. I also told Kathy Smith that I was unable to do the work I was told because of the pins in my feet. She responded by telling me work or I'll get a write up and that she tells me what I can or cannot do and that I didn't have a choice.

I told her it would be easier for me to work at a store or restaurant and she slammed the door in my face. After I got hurt I went back to The Work Release and went to the hospital and they told me I broke one of my pins in my foot after viewing the X-rays. Donte Clark

Set up an appointment with a orthopedic specialist. When I tried to go to my appointment Lt. Jennifer Henderson denied me from going. Then I tried to go to health right care and Donte Clark and Lt Henderson denied me that as well.

## Statement of claim (continued)

When I arrived at Huttonsville I made an attempt to appeal my write up and alert staff that I've been denied medical treatment. Warden, Jeffrey Stenant denied it and refused to look into my situation. I have documentation for all claims.

**V. Relief (continued)):**

---

---

---

---

---

## VII. Counsel

- A. If someone other than a lawyer is assisting you in preparing this case, state the person's name:

Marquez McEhee

- B. Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action?

Yes   /   No       

If so, state the name(s) and address(es) of each lawyer contacted:

Paul Stroble. Didn't hear any thing from him.

If not, state your reasons: \_\_\_\_\_

1000

- C. Have you previously had a lawyer representing you in a civil action in this court?

Yes No /



If so, state the lawyer's name and address:

\_\_\_\_\_  
\_\_\_\_\_

Signed this 15 day of December, 2020.

Timothy Jackson  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Plaintiff or Plaintiffs

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 15-12-20  
(Date)

Timothy Jackson  
Signature of Movant/Plaintiff

\_\_\_\_\_  
Signature of Attorney  
(if any)

Timothy Jackson  
One O'Hanlon Place  
Barboursville W.Va  
25504

CHARLESTON WV 250

21 DEC 2020 PM 3 L



Clerk United States District Court  
845 Fifth Avenue Room 101  
Huntington West Virginia 25701

This person is an inmate  
of Western Regional Jail

25701-203126